## L19000229434

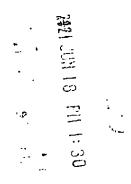
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## **COVER LETTER**

TO:

Tallahassee, FL 32314

	Registration Se Division of Co			
SUBJEC <sup>*</sup>	Gulf Coast	Home Integrity Services, LLC		
Solution		Name of Lin	nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	um all correspo	ondence concerning this matter	to the following:	
		Stephen Fabian		
			Name of Person	<del> </del>
			Firm/Company	
		11726 Old Course Rd, Per	<del>ssacola, FL 32533</del>	
		-	Address	
		Cantonment/FL 32533		
		kennedj2@yahoo.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report no-	lification)
For furthe	r information c	oncerning this matter, please c	all:	
Stephen F	abian		850 4188798	
·	Name o	f Person		ne Telephone Number
Enclosed i	is a check for th	ne following amount:		
□ \$25.00	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>failing Addres</u> Registration S		Street Address:	antine.
	Division of C		Registration So Division of Co	
	O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION ... •

2421 JUN 18 PH 1: 30

Gulf Coast Home Integrity Services, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{9/11/2019}{}$ and assigned Florida document number L19000229434 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Fabian Construction & Remodeling, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

2021 JUN 18 PM 1: 30

<u>Title</u>	Name	Address	Type of Action
AMBR	Stephen Fabian	11726 Old Course Rd	
		Cantonment, Fl. 32533	
			Change
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If amending any other infor		tall JUN	18 PM 1:30
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Effective date, if other than the series of the date is listed, the date in this document's effective date on the	nust be specific and cannot be prior to block does not meet the applical	date of filing or more than 90 da	( <b>optional)</b> ys after filing.) Pursuant to 605.0207 ( nts, this date will not be listed as the
e record specifies a delayed effec rd is filed.	tive date, but not an effective tim	ne, at 12:01 a.m. on the earlie	r of: (b) The 90th day after the
Dated	2021	·	
July 1	Landy		
	riginature of a member of methors	zed representative of a member	
Genniser Kennedy	Typed or printed		

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